STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION

APPLICATION OF COG OPERATING LLC FOR A NON-STANDARD SPACING AND PRORATION UNIT AND COMPULSORY POOLING, EDDY COUNTY, NEW MEXICO.

CASE NO. 15281

AFFIDAVIT

STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

Michael H. Feldewert, attorney in fact and authorized representative of COG Operating LLC the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application has been provided under the notice letters and proof of receipts attached hereto.

Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 1st day of April 2015 by Michael H. Feldewert.

OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 01/14/19

Notary Public

BEFORE THE OIL CONVERSATION DIVISION
Santa Fe, New Mexico
Exhibit No. 7
Submitted by: COG Operating LLC
Hearing Date: April 2, 2015

COG OPERATING LLC
PILUM 15 FEE #1H WELL

POOLED PARTIES:

Pyle Family Trust, James R. Pyle
and Jean A. Pyle, Trustees
480 Bray Central Drive
Allen, TX 75013

Charles M. Morgan and
Monica Ann Morgan
4032 U.S. Highway 82
Mayhill, NM 88339

E.A. & A.L. Everest Living Trust,
Stephen A. Everest, Sr., Successor
Trustee
1019 East Waco
Kermit, TX 79745

Sharbro Energy LLC
PO Box 840
Artesia, NM 88211

Yates Industries LLC
PO Box 840
Artesia, NM 88211

Stephen A. Everest, Jr.
1019 East Waco
Kermit, TX 79745

Hughes and Hughes, LLC
6957 NW Expressway #112
Oklahoma City, OK 73132

OFFSETS:

Enervest Energy Fund XI-WI, L.P.
1001 Fannin, Suite 800
Houston, TX 77002

Explorers Petroleum Corp.
PO Box 1933
Roswell, NM 88202

Harvey E. Yates Company
PO Box 1933
Roswell, NM 88202

John A. Yates
105 South 4th Street
Artesia,NM 88210

Lime Rock Resources II-A, L.P
Heritage Plaza, Ste. 4600
1111 Bagby Street
Houston, TX 77002

Prime Energy Corporation
2900 Wilcrest Drive, Suite 475
Houston, TX 77042

Sacramento Partners
105 South 4th Street
Artesia,NM 88210

Sharbro Oil Ltd.
PO Box 840
Artesia, NM 88210

Spiral, Inc.
PO Box 1933
Roswell, NM 88202

Trust Q'u/w/o Peggy A. Yates
John A. Yates as Trustee
105 South 4th Street
Artesia,NM 88210

Yates Energy Corporation
PO Box 2323
Roswell, NM 88202

Yates Petroleum Corporation
105 South 4th Street
Artesia,NM 88210

HOLLAND&HART LLP

Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

March 13, 2015

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: PARTIES SUBJECT TO POOLING PROCEEDINGS

Re: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico
Pilum 15 Fee No. 1H Well

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on April 2, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Stuart Dirks, at (432) 685-4354 or sdirks@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

HOLLAND&HART LLP

Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

March 13, 2015

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSET PARTIES

RE: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico
Pilum 15 Fee No. 1H Well

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application,* but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on April 2, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact If you have any questions about this matter please contact Stuart Dirks, at (432) 685-4354 or sdirks@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

MHF/COG
PILUM 15 1H

For delivery information visit
OFFIC

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	$

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594
Postmark Here
MAR 13 2015

Sent To
Street, Apt. or PO Box
City, State,

Pyle Family Trust, James R. Pyle
and Jean A. Pyle, Trustees
480 Bray Central Drive
Allen, TX 75013"

PS Form 3

7006 2760 0001 6382 8161

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No [illegible] Coverage Provided)

MHF/COG
PILUM 15 1H

For delivery information visi
OFFIC

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	$

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594
Postmark Here
MAR 13 2015

Sent To
Street, or PO I
City, St

Charles M. Morgan and
Monica Ann Morgan
4032 U.S. Highway 82
Mayhill, NM 88339

PS For

7006 2760 0001 6382 8222

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pyle Family Trust, James R. Pyle
and Jean A. Pyle, Trustees
480 Bray Central Drive
Allen, TX 75013"

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Jean A Pyle ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

Apt 1121

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 8161

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit
OFFIC

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 669

DE VARGAS POST OFFICE
Postmark Here
MAR 13 2015
USPS SANTA FE, NM 87594

Sent To
Street, Apt. or PO Box N
City, State, Z

E.A. & A.L. Everest Living Trust,
Stephen A. Everest, Sr., Successor
Trustee
1019 East Waco
Kermit, TX 79745

PS Form 38

7006 2760 0001 6382 8215

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visi
OFFIC

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 669

DE VARGAS POST OFFICE
Postmark Here
MAR 13 2015
USPS SANTA FE, NM 87594

Sent To
Street, Apt. or PO Box N
City, State, Z

Sharbro Energy LLC
PO Box 840
Artesia, NM 88211

PS Form 38

7006 2760 0001 6382 8208

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

E.A. & A.L. Everest Living Trust,
Stephen A. Everest, Sr., Successor
Trustee
1019 East Waco
Kermit, TX 79745

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

MAR 19 2015

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 8215

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sharbro Energy LLC
PO Box 840
Artesia, NM 88211

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
[signature] 3/16/15

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 8208

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visit

OFFIC

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	$

DE VARGAS POST OFFICE USPS SANTA FE, NM 87594
Postmark Here
MAR 13 2015

Sent To
Yates Industries LLC
Street, Apt. or PO Box
PO Box 840
City, State,
Artesia, NM 88211

PS Form 38

7006 2760 0001 6382 8192

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Yates Industries LLC
PO Box 840
Artesia, NM 88211

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
3-16-15

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 8192

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance

For delivery information vis

OFFIC

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	$

DE VARGAS POST OFFICE USPS SANTA FE, NM 87594
Postmark Here
MAR 1 2015

Sent To
Stephen A. Everest, Jr.
Street, Ap
1019 East Waco
or PO Box
City, State
Kermit, TX 79745

PS Form

7006 2760 0001 6382 8185

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Stephen A. Everest, Jr.
1019 East Waco
Kermit, TX 79745

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

MAR 19 2015

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☒ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 8185

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insu

For delivery information visit ou

OFFICI

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	3
Return Receipt Fee (Endorsement Required)	2
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

DE VARGAS POST OFFICE SANTA FE, NM 87501
MAR 13 2015
Postmark Here

Sent To
Street, or PO E
City, St

Hughes and Hughes, LLC
6957 NW Expressway #112
Oklahoma City, OK 73132

PS For

uctions

7006 2760 0001 6382 8178

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hughes and Hughes, LLC
6957 NW Expressway #112
Oklahoma City, OK 73132

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X L Hodges ☐ Agent ☐ Addressee

B. Received by (Printed Name) L Hodges
C. Date of Delivery 3-16-15

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

MAR 18 2015

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 8178

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/COG
PILUM 15 1H

Postage	$ 6.49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 12.49

Postmark Here
MAR 13 2015
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sent To: Enervest Energy Fund XI-WI, L.P.
Street, Apt. No., or PO Box: 1001 Fannin, Suite 800
City, State, ZIP+4: Houston, TX 77002

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2760 0001 6382 7966

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Enervest Energy Fund XI-WI, L.P.
1001 Fannin, Suite 800
Houston, TX 77002

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
3-17-15

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 7966

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/COG
PILUM 15 1H

Postage	$ 6.49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total	$ 12.49

Postmark Here
MAR 13 2015
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sent To: Explorers Petroleum Corp.
Street, Apt. No., or PO Box: PO Box 1933
City, State, ZIP+4: Roswell, NM 88202

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2760 0001 6382 1957

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Explorers Petroleum Corp.
PO Box 1933
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[illegible] 3/17/15

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

MAR 17 2015
88201

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 1957

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visit

OFFIC

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	664
Total F	

DEVARGAS POST OFFICE USPS SANTA FE, NM 87594
MAR 13 2015
Postmark Here

Sent To
Street, or PO E
City, St

Harvey E. Yates Company
PO Box 1933
Roswell, NM 88202

PS Form 3800, August 2006 ... tions

7006 2760 0001 6381 9428

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harvey E. Yates Company
PO Box 1933
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☑ Yes
If YES, enter delivery address below: ☐ No

ROSWELL, NM
MAR. 17 2015
88201

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6381 9428

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Ins

For delivery information visit o

OFFICI... USE

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	069
Total Post	

DEVARGAS POST OFFICE USPS SANTA FE, NM 87594
MAR 13 2015
Postmark Here

Sent To
Street, Apt. or PO Box
City, State,

John A. Yates
105 South 4th Street
Artesia,NM 88210

PS Form 38... tions

7006 2760 0001 6382 1964

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John A. Yates
105 South 4th Street
Artesia,NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
S. Huerta

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 1964

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit
OFFIC

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594
Postmark Here
MAR 13 2015

Sent To
Lime Rock Resources II-A, L.P.
Street, A
or PO B
Heritage Plaza, Ste. 4600
City, Sta
1111 Bagby Street
Houston, TX 77002

PS Form

7006 2760 0001 6382 1803

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Ins

For delivery information visit ou
OFFICI

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594
Postmark Here
MAR 13 2015

Sent To
Prime Energy Corporation
Street, A
or PO Bo
2900 Wilcrest Drive, Suite 475
City, Stat
Houston, TX 77042

PS Form

7006 2760 0001 6382 7904

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lime Rock Resources II-A, L.P.
Heritage Plaza, Ste. 4600
1111 Bagby Street
Houston, TX 77002

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) Kelly Sacco
C. Date of Delivery 3-18-15

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 1803

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®
OFFICIAL USE

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

Postmark Here
DEVARGAS POST OFFICE
USPS SANTA FE, NM 87594
MAR 13 2015

Sent To: Sacramento Partners
Street, Apt. No., or PO Box No.: 105 South 4th Street
City, State, ZIP+4®: Artesia,NM 88210

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6382 7898

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sacramento Partners
105 South 4th Street
Artesia,NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X S.H. ☐ Agent ☐ Addressee

B. Received by (Printed Name) S Huerta | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 7898

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®
OFFICIAL USE

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

Postmark Here
DEVARGAS POST OFFICE
USPS SANTA FE, NM 87594
MAR 13 2015

Sent To: Sharbro Oil Ltd.
Street, Apt. No., or PO Box No.: PO Box 840
City, State, ZIP+4®: Artesia, NM 88210

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6382 7881

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sharbro Oil Ltd.
PO Box 840
Artesia, NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery 3-16-15

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 7881

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

MHF/COG
PILUM 15 1H

For delivery information visi
OFFIC

Postage	$ 61
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	669

USPS SANTA FE, NM 87594
Postmark Here
MAR 2 2015
DE VARGAS POST OFFICE

7006 2760 0001 6382 7874

Sent To
Street, Ap
or PO Box
City, State

Spiral, Inc.
PO Box 1933
Roswell, NM 88202

PS Form

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

MHF/COG
PILUM 15 1H

For delivery information vis
OFFIC

Postage	$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	669

USPS SANTA FE, NM 87594
Postmark Here
MAR 3 2015
DE VARGAS POST OFFICE

7006 2760 0001 6382 7867

Sen
Stre
or P
City

Trust Q u/w/o Peggy A. Yates
John A. Yates as Trustee
105 South 4th Street
Artesia,NM 88210

PS

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Spiral, Inc.
P.O. Box 1933
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[illegible] MAR 17 2015

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ROSWELL NM 88201

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 7874

PS Form 3811, July 2013 Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Trust Q u/w/o Peggy A. Yates
John A. Yates as Trustee
105 South 4th Street
Artesia,NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
S Hunter

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6382 7867

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

POSTMARK: USPS SANTA FE, NM 87594 MAR 13 2015 DE VARGAS POST OFFICE

Sent To
Yates Energy Corporation
Street, Apt. No., or PO Box No.: PO Box 2323
City, State, ZIP+4: Roswell, NM 88202

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6382 7850

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Yates Energy Corporation
PO Box 2323
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Ted Hamilton ☐ Agent ☐ Addressee

B. Received by (Printed Name): Ted Hamilton C. Date of Delivery: 3/18/15

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ROSWELL NM 88201 MAR 18 2015

3. Service Type
☐ Certified Mail® ☑ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 2760 0001 6382 7850

PS Form 3811, July 2013 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/COG
PILUM 15 1H

Postage	$ 69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

POSTMARK: USPS SANTA FE, NM 87594 MAR 13 2015 DE VARGAS POST OFFICE

Sent To
Yates Petroleum Corporation
Street, Apt. No., or PO Box No.: 105 South 4th Street
City, State, ZIP+4: Artesia,NM 88210

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6382 7843

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Yates Petroleum Corporation
105 South 4th Street
Artesia,NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name): S Huerta C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 2760 0001 6382 7843

PS Form 3811, July 2013 Domestic Return Receipt